



## UNITED STATES PATENT AND TRADEMARK OFFICE

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Bib Data Sheet

CONFIRMATION NO. 5975

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>09/880,960 | <b>FILING DATE</b><br>06/15/2001<br><b>RULE</b> | <b>CLASS</b><br>370 | <b>GROUP ART UNIT</b><br>1661 | <b>ATTORNEY DOCKET NO.</b><br>027557-093 |
|------------------------------------|---|---------------------|-------------------------------|--|

**APPLICANTS**  
Jean-Pierre Weber, Solna, SWEDEN, Deceased;  
Paul Weber, Auderghem, BELGIUM, Legal Representative;

**\*\* CONTINUING DATA \*\*\*\*\*** *None sk*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
UNITED KINGDOM 0014837.9 06/16/2000

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 08/08/2001**

|  |                                   |                            |                          |                                |
|--|-----------------------------------|----------------------------|--------------------------|--------------------------------|
| Foreign Priority claimed<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no  | <b>STATE OR COUNTRY</b><br>SWEDEN | <b>SHEETS DRAWING</b><br>2 | <b>TOTAL CLAIMS</b><br>8 | <b>INDEPENDENT CLAIMS</b><br>1 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                   |                            |                          |                                |
| Verified and Acknowledged  | Examiner's Signature              | Initials                   |                          |                                |

**ADDRESS**  
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P.O. Box 1404  
Alexandria, VA 22313-1404

**TITLE**  
WDM signal monitoring

|                                   |   |  |
|-----------------------------------|---|--|
| <b>FILING FEE RECEIVED</b><br>840 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees                              |
|                                   |   | <input type="checkbox"/> 1.16 Fees ( Filing )                  |
|                                   |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
|                                   |   | <input type="checkbox"/> 1.18 Fees ( Issue )                   |
|                                   |   | <input type="checkbox"/> Other _____                           |
|                                   |   | <input type="checkbox"/> Credit                                |